

ISSUE CLASSIFICATION	
Class	Subclass

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PATENT NUMBER

U.S. **UTILITY** Patent Application

<p>O.I.P.E.</p> <p>SCANNED <i>Amul</i> O.A. <i>ne</i></p>	<p>PATENT DATE</p>
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APPLICATION NO. 09/547945	CONT/PRIOR D	CLASS 606 600	SUBCLASS 374	ART UNIT 9731 3737	EXAMINER Pass
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APPLICANTS

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Jeffrey Budd
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TITLE

Electrophysiology therapy catheter

PTO-2040
12/99

ISSUING CLASSIFICATION												
ORIGINAL		CROSS REFERENCE(S)										
CLASS		SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)								
INTERNATIONAL CLASSIFICATION												

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<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
___ The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
___ The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____	_____ (Primary Examiner) (Date)				
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